



CATLAB, LLC
19 Levesque Dr. #3
Eliot, ME 03903
207-200-9950
ME OCP: MTF368

Certificate of Analysis

Client Name	Warren West Group LLC	License Number	GR687
Address	289 New Portland Rd. Gorham, Maine 04038	Phone	207-253-9796
Order ID	2064	Sample Type	Dried Flower
Sample ID	07576	Strain	Killer Queen
METRC Sample ID	1A40D0300004395000003159	Serving Mass (g)/ Package	/
Date Received	06/20/2023	Collected Sample Weight	22 g
Date/Time of Collection	06/20/2023 08:00 AM	Collected By	Warren West
		Date Generated	06/26/2023

Summary of Results

Water Activity Profile	
All Results	Pass
Filth and Foreign Materials Screening	
All Results	Pass
Microbiological Screening	
All Results	Fail
Heavy Metals Screening	
All Results	Pass
Pesticides Screening	
All Results	Pass

Potency Profile	
Cannabinoid	Result mg/g
CBDV	< RL
THCV	< RL
CBDA	0.332
CBD	0.549
CBG	0.767
CBN	< RL
CBGA	3.31
CBC	< RL
exoTHC	< RL
Δ^9 -THC	3.12
Δ^8 THC	< RL
THCA	174
Total Cannabinoids %	18.2
Total CBD mg/g	0.840
Total THC mg/g	155
Total CBD %	0.0840
Total THC %	15.5

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Potency

Date Analyzed: 6/23/23
Instrument: UPLC CAT-0002/CAT-0151

Prep Date: 6/22/23
Method: SOP-QA-0016

Analyst: KB/IG

Potency	Result %	Result (mg/g)	Result (mg/package)	RL (%)	RL (mg/g)
CBDV	< RL	< RL	N/A	0.0101	0.101
THCV	< RL	< RL	N/A	0.0101	0.101
CBDA	0.0332	0.332	N/A	0.0101	0.101
CBD	0.0549	0.549	N/A	0.0101	0.101
CBG	0.0767	0.767	N/A	0.0101	0.101
CBN	< RL	< RL	N/A	0.0101	0.101
CBGA	0.331	3.31	N/A	0.0101	0.101
CBC	< RL	< RL	N/A	0.0101	0.101
exoTHC	< RL	< RL	N/A	0.0101	0.101
Δ^9 -THC	0.312	3.12	N/A	0.0101	0.101
Δ^8 THC	< RL	< RL	N/A	0.0101	0.101
THCA	17.4	174	N/A	0.0101	0.101

LCS failure, THC < 80% recovery, error in spike.

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Pesticides

Date Analyzed: 6/22/23
Instrument: CAT-0162

Prep Date: 6/21/23
Method: SOP QA-0040

Analyst: LCH

Analyte	Finding (PPB)	LOQ (PPB)	Limit (PPB)	Pass/Fail	Analyte	Finding (PPB)	LOQ (PPB)	Limit (PPB)	Pass/Fail
Abamectin	< RL	403	500	Pass	Dimethoate	< RL	39.9	200	Pass
Acephate	< RL	55.6	400	Pass	Ethoprophos	< RL	33.9	200	Pass
Acequinocyl	< RL	1150	2000	Pass	Etofenprox	< RL	78.1	400	Pass
Acetamiprid	< RL	31.2	200	Pass	Etoazole	< RL	61.2	200	Pass
Aldicarb	< RL	31.2	400	Pass	Fenoxycarb	< RL	89.9	200	Pass
Azoxystrobin	< RL	33.2	200	Pass	Fenpyroximate	< RL	83.1	400	Pass
Bifenazate	< RL	31.2	200	Pass	Fipronil	< RL	112	400	Pass
Bifenthrin	< RL	96.5	200	Pass	Flonicamid	< RL	31.2	1000	Pass
Boscalid	< RL	42.9	400	Pass	Fludioxonil	< RL	62.5	400	Pass
Carbaryl	< RL	37.0	200	Pass	Hexythiazox	< RL	54.3	1000	Pass
Carbofuran	< RL	31.2	200	Pass	Imazalil	< RL	87.3	200	Pass
Chlorantraniliprole	< RL	92.2	200	Pass	Imidacloprid	< RL	39.8	400	Pass
Chlorfenapyr	< RL	919	1000	Pass	Kresoxim-methyl	< RL	53.6	400	Pass
Chlorpyrifos	< RL	74.5	200	Pass	Malathion	< RL	66.0	200	Pass
Clofentezine	< RL	56.7	200	Pass	Metalaxyl	< RL	56.4	200	Pass
Cyfluthrin	< RL	798	1000	Pass	Methiocarb	< RL	31.2	200	Pass
Cypermethrin	< RL	196	1000	Pass	Methomyl	< RL	31.2	400	Pass
Daminozide	< RL	329	1000	Pass	Methyl parathion	< RL	193	200	Pass
DDVP (Dichlorvos)	< RL	31.2	1000	Pass	MGK-264 ²	< RL	70.2	200	Pass
Diazinon	< RL	55.3	200	Pass	Myclobutanil	< RL	37.3	200	Pass
					Naled	< RL	42.2	500	Pass

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Pesticides

Date Analyzed: 6/22/23
Instrument: CAT-0162

Prep Date: 6/21/23
Method: SOP QA-0040

Analyst: LCH

Analyte	Finding (PPB)	LOQ (PPB)	Limit (PPB)	Pass/Fail
Oxamyl	< RL	31.2	1000	Pass
Paclobutrazol	< RL	52.5	400	Pass
Permethrin ³	< RL	199	200	Pass
Phosmet	< RL	55.8	200	Pass
Piperonyl butoxide	< RL	59.0	2000	Pass
Prallethrin	< RL	103	200	Pass
Propiconazole	< RL	59.5	400	Pass
Propoxur	< RL	31.2	200	Pass
Pyrethrins ¹	< RL	248	1000	Pass
Pyridaben	< RL	59.8	200	Pass
Spinosad ⁴	< RL	62.4	200	Pass
Spiromesifen	< RL	62.5	200	Pass
Spirotetramat	< RL	37.5	200	Pass
Spiroxamine	< RL	37.9	400	Pass
tebuconazole	< RL	69.2	400	Pass
Thiacloprid	< RL	31.2	200	Pass
Thiamethoxam	< RL	62.6	200	Pass
Trifloxystrobin	< RL	59.3	200	Pass

Disclaimer:

1. Pyrethrin is measured as cumulative residues of Pyrethrin, Cinerin, and Jasmolin (CAS # 8003-34-7).
2. MGK-264 is measured as cumulative residue of MGK-264 A and MGK-264 B (CAS # 113-48-4).
3. Permethrin is measured as cumulative residue of cis- and trans- permethrin isomers. (CAS # 54774-45-7 and 51877-74-8, respectively).
4. Spinosad is a measured as cumulative residue of Spinosad A and Spinosad D (CAS # 168316-95-8 and 131929-60-7, respectively).
5. Abamectin is measured as cumulative residues of Abamectin B1a and Abamectin B1b (CAS #71751-41-2)

Note: QC samples presented analytes outside criteria in CCV (high bias for acequinocyl and abamectins), LCS (abamectins and prallethrin), and spiked matrix sample.

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Heavy Metals

Date Analyzed: 6/26/23
Instrument: CAT-0093

Prep Date: 6/22/23
Method: SOP-QA-0030

Analyst: ITG

Metals	Result (ug/kg)	RL (ug/kg)	Action Level (ug/kg)	Pass/Fail
Arsenic	< RL	84.7	200	Pass
Cadmium	< RL	55.9	200	Pass
Lead	< RL	24.7	500	Pass
Mercury	< RL	4.89	100	Pass

Microbial Analysis

Prep Date Bacteria: 6/20/23
Date Analyzed Bacteria: 6/21/23
Instrument: CAT-0140, CAT-0152

Prep Date Ecoli/SLM: 6/20/23
Date Analyzed Ecoli/SLM: 6/21/23
Method: SOP-QA-0028, SOP-QA-0038

Prep Date Yeast and Mold: 6/20/23
Date Analyzed Yeast and Mold: 6/23/23
Analyst: ITG/KW

Contaminants	Result (CFU/g)	RL (CFU/g)	Action Level (CFU/g)	Pass/Fail
Total Aerobic	< RL	100	100,000	Pass
Total Yeast/Mold	68000	100	10,000	Fail
Total Enterobacter	< RL	100	1,000	Pass
Total Coliform	< RL	100	1,000	Pass
Escherichia Coli (E. Coli)	< RL	1	1	Pass
Salmonella spp	< RL	1	1	Pass

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Filth and Foreign Materials

Date Analyzed: 6/23/23
Instrument: Visual Inspection

Prep Date: 6/23/23
Method: SOP-QA-0018

Analyst: JG/KB

Analyte	Result	Action Level	Pass/Fail
Sand, Soil, Cinders, Dirt, and Mold (%)	0	25	Pass
Embedded Foreign Material (%)	0	25	Pass
Insect Fragment	0	1	Pass
Hair	0	1	Pass
Mammalian Excreta	0	1	Pass

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Water Activity

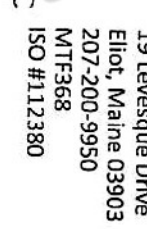
Date Analyzed: 6/23/23
Instrument: Rotronic CAT-0020

Prep Date: 6/23/23
Method: SOP-QA-0012

Analyst: JG/KB

Analyte	Finding (Aw)	RL (Aw)	Action Level (Aw)	Pass/Fail
Water Activity	0.45	0.11	0.65	Pass

Deisy Peña-Romero Lab Director



01/05/2064

Page ____ of ____

Submittal Type

Adult Use: ☒ R&D: ☐ Medical: ☐
Personal/Other: ☐

Analyses Requested

Analyses Requested	
	le
	ents
	Sign Material
	al Impurities
	/
	id only
	ure (optional)

[illegible]

Comments, special instructions, or temperature requirements:

Received In Signature:

***Potency analysis tests Δ -9-THC, THCA, CBD, CBG, CBN, CBDA, THCV, CBDV, CBC, CBGA, exoTHC, Δ -8-THC

Samples collected by (print): KIMBERLY JOHNSON
Signature: _____

Signature:  Date: 6.20.2023

Received in field by (print):	
Signature:	

Date: _____
Time: _____

Received at Lab by (print)

Date: _____

Signature:

Printed: Dr. Cecilia's Date: 6/20/2012
SA, Theresa Time: 130 5:05

QSD-0058 REV11 JG 052223



METRC®

MARIJUANA TRANSPORTATION MANIFEST

All sales transactions are to be completed prior to transportation of any MARIJUANA. The receiving entity may reject product delivered, but amount delivered must be limited to amount agreed upon in prior sales transaction.

Manifest No.	0000547313	Date Created	6/20/2023 10:30 AM
Originating Entity	WARREN WEST GROUP, LLC		For Agency Use Only
Originating License Number	GR687		
Address of Originating Entity	289 NEW PORTLAND ROAD GORHAM, ME 04038 County: CUMBERLAND		
Phone No. of Originating Entity			
1. Destination	CATLAB, LLC	Destination Phone No.	
Destination License Number	TF368	Date and Approx. Time of Departure	6/20/2023 11:30 AM
Address of Destination	19 LEVESQUE DRIVE SUITES 3 AND 5 ELIOT, ME 03903-2079 County: YORK	Date and Approx. Time of Arrival	6/20/2023 12:30 PM
		Date/Time Received	6/26/23 1:30
Route to be Traveled 368 to pick up from 687. Planned route unknown.		Notes: details for extenuating circumstances (e.g., road closure, flat tire, etc.)	
1. Outbound Transporter	CATLAB, LLC	No Layover Scheduled	
Transporter License Number	TF368		
Address of Transporter	19 LEVESQUE DRIVE SUITES 3 AND 5 ELIOT, ME 03903-2079 County: YORK		
Contact Phone No. for Inquiries: 9789928439			
Name of Person Transporting	Sydney Noyes	Employee ID of Driver	IIC5642
State Driver's License No.	S9683341 (MA)	Signature of Person Transporting	
Make, Model, License Plate No.	Toyota RAV4 CATLAB	Leg of Layover Trip	
1. Package Shipped	Production Batch No.	Item Name	Quantity
1A40D0300004395000003156 Lab Test: SubmittedForTesting		Harvest Batch_PBBxSkittles (Buds/Flower)	Shp: 22.0000 g
Item Details	Strain: Peanut Butter Breath x Skittles		
Source Harvest	HB19_2023.06.07_PBBxSkittles		
Source Package(s)	1A40D0300004395000003152		
Source Production Batch			
Req'd Lab Test Batches	Filt & Foreign Materials, Metals - Flower/Trim, Microbials - E.coli, Microbials - Enterobacteriaceae, Microbials - Salmonella, Microbials - Total Aerobic Microbial Count, Microbials - Total Coliform, Microbials - Total Yeast & Mold Count, Pesticides, Potency (Flower/Trim), Water Activity		
2. Package Shipped	Production Batch No.	Item Name	Quantity
1A40D0300004395000003157 Lab Test: SubmittedForTesting		Harvest Batch_T-Sprinkles (Buds/Flower)	Shp: 22.0000 g
Item Details	Strain: Titty Sprinkles		
Source Harvest	HB19_2023.06.07_Titty Sprinkles		
Source Package(s)	1A40D0300004395000003153		
Source Production Batch			
Req'd Lab Test Batches	Filt & Foreign Materials, Metals - Flower/Trim, Microbials - E.coli, Microbials - Enterobacteriaceae, Microbials - Salmonella, Microbials - Total Aerobic Microbial Count, Microbials - Total Coliform, Microbials - Total Yeast & Mold Count, Pesticides, Potency (Flower/Trim), Water Activity		



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Manifest No.	0000547313	Date Created	6/20/2023 10:30 AM
3. Package Shipped	Production Batch No.	Item Name	Quantity
1A40D0300004395000003158 Lab Test: SubmittedForTesting		Harvest Batch_Mimosa (Buds/Flower)	Shp: 22.0000 g
Item Details	Strain: Mimosa		
Source Harvest	HB19_2023.06.07_Mimosa		
Source Package(s)	1A40D0300004395000003154		
Source Production Batch			
Req'd Lab Test Batches	Filth & Foreign Materials, Metals - Flower/Trim, Microbials - E.coli, Microbials - Enterobacteriaceae, Microbials - Salmonella, Microbials - Total Aerobic Microbial Count, Microbials - Total Coliform, Microbials - Total Yeast & Mold Count, Pesticides, Potency (Flower/Trim), Water Activity		
4. Package Shipped	Production Batch No.	Item Name	Quantity
1A40D0300004395000003159 Lab Test: SubmittedForTesting		Harvest Batch_Killer Queen (Buds/Flower)	Shp: 22.0000 g
Item Details	Strain: Killer queen		
Source Harvest	HB19_2023.06.07_Killer Queen		
Source Package(s)	1A40D0300004395000003155		
Source Production Batch			
Req'd Lab Test Batches	Filth & Foreign Materials, Metals - Flower/Trim, Microbials - E.coli, Microbials - Enterobacteriaceae, Microbials - Salmonella, Microbials - Total Aerobic Microbial Count, Microbials - Total Coliform, Microbials - Total Yeast & Mold Count, Pesticides, Potency (Flower/Trim), Water Activity		
PRODUCT REJECTION (if only a portion of shipment is rejected, circle that portion above)			
Name of Person Receiving or Rejecting Product	Joe Geddes		
I confirm that the contents of this shipment match weight records entered above, and I agree to take custody of those portions of this shipment not circled above. Those portions circled were returned to the individual delivering this shipment.			
Signature	[Signature]		Date 6/20/23
Signature of individual taking receipt of rejected portion of this shipment			

Sample Receipt Condition Report

CATLAB, LLC

Order ID: 2069

Samples Received Via: ☒ CATLAB Sampler/Courier ☐ Licensee ☐ Certified Sampler

Custody Seals Present and Intact on Transport Container: ☒ Yes ☐ No ☐ N/A Comments: _____

Custody Seals Present and Intact on Sample Containers: ☐ Yes ☐ No ☐ N/A Comments: _____

Type of submittal: ☐ Medical ☒ Adult Use ☐ Other Comments: _____

Receipt Temp: _____ Humidity: _____ If needed, Ice present? Y / N Ambient: _____

Samples Received

	# of Samples	# of Containers	Notes:
Flower	<u>2/</u>	<u>4/</u>	
Trim			
Pre-Roll			
Infused Pre-Roll			
Retail Units			
Concentrate			
Infused Edibles			
Solid Batch			
Liquid Batch			

Proper Sample Containers/Enough Sample?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments: _____
Analysis Marked on COC Match Bottles Rec'v?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments: _____
Date/Time/ID on Samples Match COC?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments: _____
Rushes Communicates to analyst in writing?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments: _____
Sample tampered, manipulated, adulterated or contaminated?	<input checked="" type="checkbox"/> Y / <input checked="" type="checkbox"/> N / <input type="checkbox"/> NA	Comments: _____
AUMP Sample size by Batch Size OK?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments: _____
Samples collected in the manner required by OMP?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments: _____
Transport Manifest Received?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments: _____
Samples Received in Metric?	<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N / <input type="checkbox"/> NA	Comments: _____

Notes/Comments: _____

Initials/Date: FE 6/20/23

Reviewer's Checklist

- ☒ Client ID/Contact
- ☒ Reporting Instructions
- ☒ Rushes Communicated
- ☒ Temp, Condition OK
- ☒ Sample ID/Date/Time
- ☒ Matrix
- ☒ TAT Correct
- ☒ Correct Analyses

- If Adult Use:
- ☒ Logged in Metric
 - ☐ Transfer Manifest
- If CATLAB Samples:
- ☐ Sampling Form
 - ☐ Attestation Form

Initials: FE Date: 6/23/23